

subsection, "medicare cost report" means form 2551, form 2552, or any similar successor form promulgated by the United States department of health and human services or its successor agency for the purpose of determining allowable, reimbursable costs for delivery of care or services under titles V, XVIII, or XIX of the social security amendments of 1965, as amended.

(b) In addition to the basic payment per patient-day of care, each hospital-based facility shall be paid on a prospective basis:

(1) Its actual property and utility costs per patient-day, to be determined by dividing its total projected property and utility costs, subject to the interest rate limitation, for its upcoming fiscal year, as submitted by each such facility to the director not later than ninety (90) days prior to the beginning date of such fiscal year, by the total number of patient-days estimated by such facility; and

(2) A monthly incentive payment equal to the computed difference between the facility's actual payment per patient-day and the base rate established for the class pursuant to section 56-103(a), Idaho Code, and this part. This computed difference shall be:

1. One-half ($1/2$) of the difference, where the one hundredth percentile applies to such facility's class;

2. One-third ($1/3$) of the difference, where the ninetieth percentile applies to such facility's class;

3. One-fourth ($1/4$) of the difference, where the eightieth percentile applies to such facility's class; or

4. One-sixth ($1/6$) of the difference, where the seventy-fifth percentile applies to such facility's class;

provided, that in no event shall the computed difference exceed one dollar and fifty cents (\$1.50) per patient-day.

(c) Actual payments made by the director to each hospital-based facility pursuant to sections 56-103 and 56-105, Idaho Code, and this section, shall be subject to audit and settlement under section 56-107, Idaho Code. In no event shall reimbursement to any facility exceed the usual and customary charges made to private pay patients. [I.C., § 56-120, as added by 1981, ch. 159, § 1, p. 271; am. 1984, ch. 118, § 6, p. 264; am. 1985, ch. 128, § 9, p. 312.]

Compiler's notes. Titles V, XVIII or XIX of the social security amendments of 1965 referred to in subsection (a) are compiled as 42 U.S.C. §§ 701-716, 1395-1395ss, and 1397-1397f, respectively.

The words enclosed in parentheses so appeared in the law as enacted.

Section 5 of S.L. 1984, ch. 118 is compiled as § 56-113.

Section 8 of S.L. 1985, ch. 128 is compiled as § 56-113.

Sec. to sec. ref. This section is referred to in § 56-108.

56-121. New hospital-based facilities. — For the first fiscal year of a hospital-based facility established on or after April 1, 1985, which seeks to contract for the first time to provide medicaid services to recipients, the director shall determine payment in the same manner as specified in section 56-120, Idaho Code, except that, in lieu of the medicare cost report, the hospital-based facility shall submit to the director, not later than ninety

(90) days prior to the beginning date of the fiscal year in which the prospective rate is to be effective, a prospective budget containing the information necessary to complete the formula set forth in section 56-120, Idaho Code. The base rate for the facility shall be the base rate for the free-standing class. Thereafter, such determination for such facility shall be done in accordance with section 56-120, Idaho Code. [I.C., § 56-121, as added by 1981, ch. 159, § 1, p. 271; am. 1984, ch. 118, § 7, p. 264; am. 1985, ch. 128, § 10, p. 312.]

Compiler's notes. Section 11 of S.L. 1985, ch. 128 declared an emergency. Approved March 21, 1985.

56-122 — 56-129. [Reserved.]

PART D.

MISCELLANEOUS

56-130. Development of payment, adjustment, audit and settlement mechanisms. — (a) Not later than seventy-five (75) days after the effective date of this section, the legislative council shall develop and transmit to the director recommendations for promulgation by rule, as specified in sections 56-104 through 56-107, Idaho Code, to include the following:

- (1) A statistical model and appropriate indices for an annual combined inflator index, to include at least measures of cost increases in malpractice insurance, food, labor and other variable nonproperty cost categories;
- (2) Uniform definitions, standards, and procedures for adjustments to prospective rates established by the director for facilities in the manner specified in this chapter, which take into account at least the following:

1. Unforeseen increases or decreases in cost categories greater or lesser than forecasted by the annual combined inflator index which are outside the control of any individual facility;
2. Unanticipated expenses required to prevent or correct conditions specified in section 39-4908(c), Idaho Code; and
3. Such other circumstances or emergencies which may be identified and agreed upon pursuant to subsection (b) of this section;

- (3) Regulatory accounting, reporting, and auditing provisions which may be required; and

- (4) Regulatory settlement provisions which may be required.

(b) The legislative council will develop the items specified in subsection (a) of this section;

- (1) In cooperation with an advisory committee, appointed by the legislative council, to be composed of representatives of the director, the Idaho society of certified public accountants, and free-standing skilled care, free-standing intermediate care, and hospital-based facilities; and

- (2) In a manner which will achieve the principles of prospective reimbursement as stated in parts A, B, and C of this chapter. [I.C., § 56-130, as added by 1981, ch. 159, § 1, p. 271; am. 1993, ch. 327, § 25, p. 1186.]

Compiler's notes. Section 41 of S.L. 1993, ch. 327 read: "All employees employed by the Joint Senate Finance-House Appropriations Committee, the Legislative Auditor or Legislative Budget Office on June 30, 1993, shall be transferred to the Legislative Council and shall be deemed to be employees of the Legislative Council on July 1, 1993. All moneys which have been appropriated to and been encumbered by the Joint Senate Finance-House Appropriations Committee, the Legislative Budget Office and the Legislative Auditor on June 30, 1993, shall be transferred to the Legislative Council and shall be deemed to be encumbered by that body. All moneys appropriated to the Joint Senate Finance-House Appropriations Committee for the Legislative Auditor and the Legislative Budget Office are deemed appropriated to the

Legislative Council for the same period and purpose."

Sections 24 and 26 of S.L. 1993, ch. 327 are compiled as §§ 50-2707 and 56-450, respectively.

Sec. to sec. ref. This section is referred to in §§ 56-105, 56-106, 56-107 and 56-120.

Costs Beyond Facility Control.

Regulation, which provided that costs incurred by long-term health care facility in excess of the percentile cap will be disallowed unless the facility can establish that such costs were beyond its control, on its face was valid and reasonably encouraged efficiency while adequately reimbursing facilities. *Idaho County Nursing Home v. Idaho Dep't of Health & Welfare*, 120 Idaho 933, 821 P.2d 988 (1991).

56-131. Multiple-use plans. — The director shall promulgate such rules, as he deems advisable to enable and encourage facilities to adopt plans for offering additional services or programs within their institutions which will promote appropriate levels of care for recipients residing in their service areas and, as a result, achieve cost savings for the medicaid program. In developing such rules, the director shall consult with representatives of free-standing skilled care, free-standing intermediate care, free standing special care, and hospital-based facilities. [I.C., § 56-131, as added by 1981, ch. 159, § 1, p. 271; am. 1988, ch. 155, § 3, p. 279.]

Compiler's notes. Section 2 of S.L. 1988, ch. 155 is compiled as § 56-114.

56-132. Disputes. — (a) If any facility wishes to contest the way in which a rule or contract provision relating to the prospective, cost-related reimbursement system was applied to such facility by the director, it shall first pursue the administrative review process set forth in section 56-133, Idaho Code.

(b) The administrative review process in section 56-133, Idaho Code, need not be exhausted if a facility wishes to challenge the legal validity of a statute, rule, or contract provision. [I.C., § 56-132, as added by 1981, ch. 159, § 1, p. 271.]

56-133. Administrative review process. — (a) Within thirty (30) days after a facility is notified of an action or determination it wishes to challenge, such facility shall request in writing that the director review such determination. The request shall be signed by the licensed administrator of the facility, shall identify the challenged determination and the date thereof, and shall state as specifically as practicable the grounds for its contention that the determination was erroneous. Copies of any documentation on which such facility intends to rely to support its position shall be included with the request.

(b) After receiving a request meeting the above criteria, the director will contact the facility to schedule a conference for the earliest mutually convenient time. The conference shall be scheduled for no later than thirty (30) days after a properly-completed request is received, unless both parties agree in writing to a specified later date.

(c) The facility and the director shall attend the conference. In addition, representatives selected by the facility may attend and participate. The facility shall bring to the conference, or provide to the director in advance of the conference, any documentation on which the facility intends to rely to support its contentions. The parties shall clarify and attempt to resolve the issues at the conference. If additional documentation is needed to resolve the issues, a second session of the conference shall be scheduled for not later than thirty (30) days after the initial session, unless both parties agree in writing to a specific later date.

(d) A written decision by the director will be furnished to the facility within thirty (30) days after the conclusion of the conference.

(e) If the facility desires review of an adverse decision of the director, it shall, within twenty-eight (28) days following receipt of such decision, request a hearing in writing on the contested matter, in accordance with the provisions of chapter 52, title 67, Idaho Code. [I.C., § 56-133, as added by 1981, ch. 159, § 1, p. 271; am. 1993, ch. 216, § 94, p. 587.]

Compiler's notes. Sections 93 and 95 of S.L. 1993, ch. 216 are compiled as §§ 54-4215 and 58-405, respectively.

Cited in: Idaho County Nursing Home v. Idaho Dep't of Health & Welfare, 120 Idaho 933, 821 P.2d 988 (1991).

56-134. Denial, suspension, revocation of license or provisional license — Penalty. — The director is authorized to deny, suspend, or revoke a license or provisional license or, in lieu thereof or in addition thereto, assess monetary penalties of a civil nature not to exceed one thousand dollars (\$1,000) per violation in any case in which it finds that the facility, or any partner, officer, director, owner of five per cent (5%) or more of the assets of the facility, or managing employee:

- (1) Failed or refused to comply with the requirements of this chapter, or the rules and regulations established hereunder; or
- (2) Has knowingly or with reason to know made a false statement of a material fact in any record required by this chapter; or
- (3) Refused to allow representatives or agents of the director to inspect all books, records, and files required to be maintained by the provisions of this chapter, or to inspect any portion of the facility's premises; or
- (4) Wilfully prevented, interfered [interfered] with, or attempted to impede in any way the work of any duly authorized representative of the director and the lawful enforcement of any provision of this chapter; or
- (5) Wilfully prevented or interfered [interfered] with any representative of the director in the preservation of evidence of any violation of any of the provisions of this chapter, or the rules and regulations promulgated hereunder. [I.C., § 56-134, as added by 1981, ch. 159, § 1, p. 271.]

CHAPTER 2

PUBLIC ASSISTANCE LAW

SECTION.

- 56-201. Definitions.
- 56-202. Duties of director of state department of health and welfare.
- 56-203. Powers of state department.
- 56-203A. Authority of department to enforce child support — Support enforcement services.
- 56-203B. Payment of public assistance for child constitutes debt to department by natural or adoptive parents — Limitations — Department subrogated to rights.
- 56-203C. Powers of department.
- 56-203D. Set-off procedure for child support debt.
- 56-203E. Lottery prize set-off procedure for support debt.
- 56-204. [Repealed.]
- 56-204A. Services for children.
- 56-204B. Temporary shelter care.
- 56-205. Eligibility for public assistance.
- 56-206. General assistance.
- 56-207. Old-age assistance.
- 56-208. Aid to the blind.
- 56-209. Aid to dependent children.
- 56-209a. Aid to the disabled.
- 56-209b. Medical assistance — Medical assistance account.
- 56-209c. Denial of payment for abortions under certain conditions.
- 56-209d. Medical assistance program — Services to be provided.
- 56-209e. Eligibility of married couples for medical assistance under the medicaid program.
- *56-209f. State medical assistance program.
- 56-210. Amount of assistance.
- 56-210a. [Repealed.]
- 56-211. Application for public assistance.
- 56-212. Investigation of application.
- 56-213. Examination to determine blindness.
- 56-214. Award of public assistance — Ineligibility upon transfer of property.
- 56-214A. Award of public assistance — Recipient's right of free choice.
- 56-215. Redetermination of awards.

SECTION.

- 56-216. Appeal and fair hearing.
- 56-217. Cooperative agreements.
- 56-218. Recovery of certain medical assistance.
- 56-219. Payment for incompetent recipient — Appointment of guardian for public assistance.
- 56-220. Payment on death of recipient — Appointment of administrator of public assistance.
- 56-221. Confidential character of public assistance records.
- 56-222. Misuse of public assistance lists and records.
- 56-223. Public assistance not assignable.
- 56-224. Recovery.
- 56-224a — 56-224c. [Repealed.]
- 56-225, 56-226. [Repealed.]
- 56-227. Fraudulent acts — Penalty.
- 56-227A. Provider fraud — Criminal penalty.
- 56-227B. Provider fraud — Damages.
- 56-227C. Subpoena power.
- 56-227D. Federal food stamps — Unauthorized use — Exception — Definition.
- 56-228. Limitations of act.
- 56-229. Separability.
- 56-230. Short title.
- 56-231. Public assistance in locating and determining the financial resources of parents and other persons liable for support of dependents.
- 56-232. Medical assistance programs — Contracts with independent agencies for administration of programs.
- 56-233. Procedure for disbursement of funds to recipients. [For effective date, see Compiler's notes.]
- 56-233. Procedure for disbursement of funds to recipients. [For effective date, see Compiler's notes.]
- 56-233a. [Repealed.]
- 56-234. [Reserved.]
- 56-235. Idaho state school and hospital.
- 56-236 — 56-244. [Repealed.]

56-201. Definitions. — As used in this act:

- (a) "State department" shall mean the state department of health and welfare;
- (b) "Director" shall mean the director of the department of health and welfare;
- (c) "Public welfare" shall mean public assistance and social services;

Compiler's notes. The bracketed words "interfered" in subdivisions (4) and (5) were inserted by the compiler.

56-134A. Remedies for deficient care. — If the director finds that a facility is deficient in, or no longer meets, any of the requirements of participation set forth in 42 U.S.C. 1396r(b), (c) and (d), which are hereby incorporated by reference, the director has the authority, as provided in title XIX of the social security act, to:

- (1) terminate the facility's participation in the medicaid program;
- (2) deny payment;
- (3) assess and collect a civil money penalty with interest;
- (4) appoint temporary management of the facility;
- (5) close the facility and/or transfer residents to another certified facility;
- (6) direct a plan of correction;
- (7) ban admission of persons with certain diagnoses or requiring specialized care;
- (8) ban all admissions to the facility;
- (9) assign monitors to the facility; or
- (10) reduce the licensed bed capacity. [I.C., § 56-134A, as added by 1990, ch. 303, § 1, p. 833.]

Compiler's notes. Title XIX of the social security act referred to in this section is compiled as 42 U.S.C. § 1396 et seq.

Section 2 of S.L. 1990, ch. 303 provided that the act should take effect on and after October 1, 1990.

56-135. Adoption of rules. — The director shall adopt, promulgate, amend, and rescind such administrative rules as are necessary to carry out the policies and purposes of this chapter, as provided in chapter 52, title 67, Idaho Code. [I.C., § 56-135, as added by 1981, ch. 159, § 1, p. 271.]

Compiler's notes. Section 2 of S.L. 1981, ch. 159 repealed § 56-233a.

Section 3 of S.L. 1981, ch. 159 read: "(1) An emergency existing therefor, which emergency is hereby declared to exist, subsection (c) of Section 56-104, Idaho Code, as enacted by Section 1 of this act shall be in full force and effect on and after its passage and approval.

"(2) Sections 56-101, 56-105, 56-106, 56-107, 56-130 and all other subsections or sections necessary to enable the director of the department of health and welfare to pro-

mulgate rules and regulations prior to January 1, 1982, to be effective January 1, 1982, shall be in full force and effect on and after July 1, 1981.

"(3) Section 2 of this act and all other codified sections of this act shall be in full force and effect on and after January 1, 1982."

Sec. to sec. ref. This section is referred to in §§ 56-105, 56-106 and 56-107.

Cited in: Idaho County Nursing Home v. Idaho Dep't of Health & Welfare, 120 Idaho 933, 821 P.2d 988 (1991).

SECTION.

56-201. D.

56-202. D.

56-203. P.

56-203A.

56-203B.

56-203C.

56-203D.

56-203E.

56-204. [F]

56-204A.

56-204B.

56-205. E

56-206. G

56-207. O

56-208. A

56-209. A

56-209a.

56-209b.

56-209c. I

56-209d.

56-209e.

*56-209f.

56-210. A

56-210a.

56-211. A

56-212. I

56-213. E

56-214. A

56-214A.

56-215. R

56-20

(a) "S

welfare:

(b) "I

welfare:

(c) "F

Year	Adjournment Date
1955	March 5, 1955
1957	March 16, 1957
1959	March 9, 1959
1961	March 2, 1961
1961 (1st E.S.)	August 4, 1961
1963	March 19, 1963
1964 (E.S.)	August 1, 1964
1965	March 18, 1965
1965 (1st E.S.)	March 25, 1965
1966 (2nd E.S.)	March 5, 1966
1966 (3rd E.S.)	March 17, 1966
1967	March 31, 1967
1967 (1st E.S.)	June 23, 1967
1968 (2nd E.S.)	February 9, 1968
1969	March 27, 1969
1970	March 7, 1970
1971	March 19, 1971
1971 (E.S.)	April 8, 1971
1972	March 25, 1972
1973	March 13, 1973
1974	March 30, 1974
1975	March 22, 1975
1976	March 19, 1976
1977	March 21, 1977
1978	March 18, 1978
1979	March 26, 1979
1980	March 31, 1980
1981	March 27, 1981
1981 (E. S.)	July 21, 1981
1982	March 24, 1982
1983	April 14, 1983
1983 (E. S.)	May 11, 1983
1984	March 31, 1984
1985	March 13, 1985
1986	March 28, 1986
1987	April 1, 1987
1988	March 31, 1988
1989	March 29, 1989
1990	March 30, 1990
1991	March 30, 1991
1992	April 3, 1992
1992 (E. S.)	July 28, 1992
1993	March 27, 1993
1994	April 1, 1994

TABLE OF CONTENTS

TITLE 56

PUBLIC ASSISTANCE AND WELFARE

Chapter	Sections
1. Department of Environmental and Community Services.....	[56-101 — 56-104 Repealed]
2. Public Assistance Law	56-201 — 56-239
3. County Councils of Public Assistance	56-301 — 56-303
4. Cooperative Welfare Fund	56-401 — 56-407
5. Food Stamp Revolving Fund	56-501 — 56-504
6. Youth Conservation.....	56-601 — 56-609
7. Rights of Blind and Physically Handicapped Persons.....	56-701 — 56-707
8. Hard-to-Place Children	56-801 — 56-806
9. Telecommunications Service Assistance	56-901 — 56-905

TITLE 57

PUBLIC FUNDS IN GENERAL

1. Public Depository Law	57-101 — 57-145
2. Municipal Bond Law	57-201 — 57-230
3. Filing of Lists of Bonds	57-301 — 57-306
4. Registration of Coupon Bonds.....	57-401 — 57-404
5. Issuance of Refunding Bonds.....	57-501 — 57-503
6. Sinking Funds — Miscellaneous Provisions	57-601 — 57-604
7. Investment of Permanent Funds.....	57-701 — 57-727
8. Funds Consolidation Act	57-801 — 57-819
9. Public Obligations Registration Act.....	57-901 — 57-914
10. State Land Water Maintenance and Assessment Fund	[57-1001 — 57-1005 Repealed]
11. Permanent Building Fund	57-1101 — 57-1113
12. Taylor Grazing Act Funds.....	57-1201 — 57-1203
13. Forest Reserve and Mining Impact Funds	57-1301 — 57-1305
14. Rural Rehabilitation Funds.....	57-1401 — 57-1406
15. Waterways Improvement Fund.....	57-1501, 57-1502
16. Governor's Emergency Fund.....	57-1601
17. Central Tumor Registry Fund	57-1701
18. Park and Recreation Capital Improvement Account.....	57-1801
19. Off-Road Motor Vehicle Fund.....	57-1901

TITLE 58

PUBLIC LANDS

1. Department of Lands	58-101 — 58-154
2. Indemnity Lieu Land Selections	58-201 — 58-206
3. Appraisalment, Lease, and Sale of Lands	58-301 — 58-337
4. Sale of Timber on State Lands	58-401 — 58-416
5. State Parks and State Forests.....	58-501 — 58-506
6. Rights of Way over State Lands.....	58-601 — 58-604
7. Cessions to the Federal Government	58-701 — 58-707
8. Town Sites	58-801 — 58-823
9. Possessory Actions For Public Lands	58-901 — 58-905
10. State Commission on Federal Land Laws.....	[58-1001 — 58-1007 Repealed]
11. Real Property Acquisition.....	58-1101 — 58-1106

IDAHO ADMINISTRATIVE CODE

IDAPA 16.05.03

IDAPA 16
TITLE 05
Chapter 03

RULES GOVERNING CONTESTED CASE
PROCEEDINGS AND DECLARATORY RULINGS

000. LEGAL AUTHORITY. The Idaho Legislature has granted the Director of the Department of Health and Welfare and the Board of Health and Welfare the power and authority to conduct contested case proceedings and issue declaratory rulings, and to adopt rules governing such proceedings pursuant to Sections 16-107, 39-103(1) and (3), 39-104, 39-105, 39-106, 39-107, 56-101(4), 56-133, 56-135, 56-201(b), 56-202, 56-203, 56-204A, 56-210, 56-216, and 67-5206(5)(b), Idaho Code. (7-1-93)

001. TITLE AND SCOPE. (7-1-93)

01. Title. These rules are to be cited fully as Idaho Department of Health and Welfare Rules, IDAPA 16, Title 5, Chapter 3, "Rules Governing Contested Case Proceedings and Declaratory Rulings." (7-1-93)

02. Scope. These rules establish general standards for contested case proceedings, requests for rulemaking, waiver of rules, fees for documents and declaratory ruling proceedings as required by law. Rules for fair hearings conducted to determine eligibility for benefits or services pursuant to the Food Stamps, Public Assistance, Medical Assistance and Social Services Programs may be found in Sections 300., et seq., and those specific rules and regulations shall be followed for those hearings to the extent that they are inconsistent with Sections 100., through 102. Personnel grievances and employment related actions are governed by and may be found in IDAPA 28.20, et seq., Rules of the Idaho Personnel Commission, and the Personnel Policy and Procedures Manual of the Department. (7-1-93)

002. WRITTEN INTERPRETATIONS. In accordance with Section 67-5201(16)(b)(iv), Idaho Code, the Department has written statements which pertain to the interpretation of the rules of this chapter, or to the documentation of compliance with the rules of this chapter. These documents are available for public inspection and copying at cost in the main office and in each regional office of the Department. (7-1-93)

003. ADMINISTRATIVE APPEALS. All contested cases shall be governed by the provisions of this chapter. The Board of Health and Welfare and the Director of the Department of Health and Welfare find that the provisions of IDAPA 04.11.01000 et seq., Idaho Rules of Administrative Procedure of the Attorney General, are inapplicable and inappropriate for contested cases involving the programs administered by the Department, under the circumstances, because of the specific and unique requirements of federal and state law regarding notices, hearing processes, procedural requirements, time-lines, program guidelines, and other provisions requiring the Department to adopt its own procedures pursuant to Section 67-5206(5)(b), Idaho Code, and hereby affirmatively promulgates and adopts alternative procedures and elects not to be governed by any of the provisions of IDAPA 04.11.01000, et seq., Idaho Rules of Administrative Procedures of the Attorney General. (7-1-93)

004. (RESERVED).

005. DEFINITIONS AND ABBREVIATIONS. For the purposes of this chapter the following definitions apply: (7-1-93)

01. AABD. Aid to the Aged, Blind and Disabled. (7-1-93)

02. AFDC. Aid to Families with Dependant Children. (7-1-93)

PAGE 3529

TN • 95-06	DATE APPROVED _____
SUPERSEDES	EFFECTIVE DATE _____
TN • _____	DATE TO C.O. _____
COMMENTS	

03. Board. The Idaho Board of Health and Welfare as established in Section 39-107, Idaho Code. (7-1-93)

04. Contested Case. A proceeding resulting in an Order or Notice of Decision, in which the legal rights, duties, licenses, privileges, immunities, or other legal interests of a party or one (1) or more specific persons are required by law to be determined by the Department or Board after an opportunity for a hearing, which shall not include rule-making nor Personnel grievances and employment related actions. (7-1-93)

05. Declaratory Ruling. An interpretation by the Board or Director as to the applicability of any statute, or order, or a rule of the Department or Board, to a Person's circumstances rendered pursuant to Section 67-5232, Idaho Code. (7-1-93)

06. Department. The Idaho Department of Health and Welfare established in Sections 39-104, 56-201, 56-202 and 56-203, Idaho Code. (7-1-93)

07. Director. The Director of the Department of Health and Welfare, as established in Sections 39-104, 39-105, 39-106, 56-202 and 56-203, Idaho Code. Except for specific authority statutorily granted to the Board of Health and Welfare, all administrative authority over Department functions rests with the Director. (7-1-93)

08. Hearing Authority. The Director and/or Board, or a Hearing Officer. No Hearing Authority or Hearing Officer, including Fair Hearing Officer, shall have the jurisdiction or authority to invalidate any federal or state statute or rule or regulation. (7-1-93)

09. Hearing Coordinator. The Person who coordinates, schedules, and administers contested case proceedings, and acts as custodian of records for all information and documentation involving contested case proceedings held by the Director, the Board, or a designated Hearing Officer, and who assigns a permanent docket number to each case for purposes of identification. The coordinator's mailing address and telephone number is:

Hearing Coordinator
Administrative Procedures Section
Department of Health and Welfare
Statehouse
Boise, Idaho 83720
(208) 334-5559

(7-1-93)

10. Hearing Officer. The Director and/or Board, or a Person appointed or designated by the Director and/or the Board who presides over a particular contested case hearing and any related proceedings. (7-1-93)

11. Party. Party includes the following: (7-1-93)

a. Complainant. The Department or the Board when the Department or Board initiates an action against any Person. (7-1-93)

b. Intervenor. Any Person, other than one of the original Parties, who requests to be admitted as a Party in a contested case proceeding, and whose right to intervene is granted under Idaho law. (7-1-93)

c. Petitioner. Any Person who files a written Petition for a determination of or appeal of his rights, duties, license or interests with the Department or Board. (7-1-93)

d. Respondent. Any Person, including the Department or Board, who responds to a valid Petition, written request, or complaint. (7-1-93)

12. Person. Any individual, partnership, corporation, association, governmental subdivision, department, agency or instrumentality, or public and private organization or entity of any character. (7-1-93)